

ISSUE OF REFERENCE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DP	10	4-5-98
O.I.P.E. CLASSIFIER		10	4-14-98
FORMALITY REVIEW	O.O	68971	5598

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7-10-00
2	✓	✓	1-15-01
3	✓	✓	9-29-01
4	✓	✓	6-6-02
5	✓	✓	10-1-04
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
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47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	7-10-00
52	✓	✓	1-15-01
53	✓	✓	9-29-01
54	✓	✓	6-6-02
55	✓	✓	10-1-04
56	✓	✓	
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97	✓	✓	
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99	✓	✓	
100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	7-10-00
102	✓	✓	1-15-01
103	✓	✓	9-29-01
104	✓	✓	6-6-02
105	✓	✓	10-1-04
106	✓	✓	
107	✓	✓	
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141	✓	✓	
142	✓	✓	
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145	✓	✓	
146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)